PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 Application or Docket Number 19, 1999											
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMA TYP	LL ENTITY	OR		R THAN ENTITY	
FOR		NUMB	ER FILED	NUMBER	EXTRA	RAT	E FEE	7/2	RATE	FEE	
BASIC FEE							345.00	OR		690.00	
TOTAL CLAIMS	1	minus	20= *		X\$ 9	= (OR	X\$18=			
INDEPENDENT	1	minus	3 = 1		X39	- () () ()	OR	X78=			
MULTIPLE DEP	CLAIM P	RESENT	POPPINI NA	in unit	1120		¥.,8	Barry Yar			
* If the difference in column 1 is loca than zero enter "0" in column 0										840	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						SMAI	OTHER THAN SMALL ENTITY OR SMALL ENTITY				
ENT A	CL REM AI	AIMS IAINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL]_	PATE	ADDI- TIONAL FEE	
Total Independent	. (6	Minus	"20	=	X\$ 9	=	OR	X\$18=		
Independent		DN OF M	Minus	PENDENT CLAIM	1=	X39=		OR	X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+130=	=	or	+260=		
						TOT ADDIT. FI		OR	TOTAL ADDIT, FEE		
		umn 1)		(Column 2)	(Column 3)			•• ·			
Total	REM AF	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	*		Minus	**	=	X\$ 9=	•	OR	X\$18=		
Independent			Minus	***	=	X39=		OR	X78=		
FIRST PRES	SENTATIO	N OF MU	JLTIPLE DEF	PENDENT CLAIM		+130=		OR	+260=		
	•				12.0	TOTA ADDIT. FE		OR	TOTAL ADDIT. FEE		
	(Colu	ımn 1)		(Column 2)	(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*	-			
Total Independent	REM/	AIMS AINING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	*		Minus	**	=	X\$ 9=		OR	X\$18=		
Independent	•		Minus .	***	=	X39=			X78=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	OR	∧/0=		
If the entry in col	ump 1 le le	ce than th	a antru in col	nn 2 write "O" in an	lump 2	+130=		OR	+260=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									TOTAL	Acares .	
The Highest Nu	mber Prev	ously Paid	For (Total or	Independent) is the	highest number	found in the a	appropriate box	in col	umn 1:		